

State of Louisiana Notary Division

P.O. Box 94125 Baton Rouge, LA 70809 225-922-0507 **Tom Schedler** Secretary of State

Notary Instruction Provider R.S. 35:191.4

2013 Registration

(PLEASE TYPE OR PR	INT)				
Provider Name					
Provider is: (check one)					
☐ Individual ☐ Partners	ship LLC Corporation	☐ State Chartered Educa	ational Institution		
Provider Mailing Addre	ess	City	State	Zip	
Instruction Site Physic	cal Address	City	State	Zip	
Instruction Site Physic	cal Address	City	State	Zip	
•		·		•	
(II more than 2 locations	s, list addresses on additiona	ai page provided)	Provide	r Email Address	
Provider Representativ	ve:	_			
			Prov	ider Website	
Full Name	Title	Address		Phone	
Print names of instruc	tors below. (If more than 3	instructors, list on additio	nal page provided.))	
1.	2.		3.		
Method of Instruction:	(check all that apply)				
·	n ☐ Correspondence Instruc	ction Electronic Instruct	ion 🗆 Other		
Course Hours:	Cost: \$				
Performance Bond R	.S. 35:191.4(C) <u>\$25,000 Pe</u>	rformance Bond required	to be in favor of the	Secretary of State	
University of Louisiana S	Providers that operate under System, Board of Supervisor visors of Southern Universited Colleges.	rs of Louisiana State Univ	ersity and Agricultu	ral and Mechanical	
Name of Surety		Amount (must be	e at least \$25,000)	Expiration Date	
≭ Please provide	an original performance b	ond along with your co	mpleted provider r	egistration form. ≭	
I certify under	penalty of criminal prosecut	ion that the information pr	ovided herein is tru	e and complete.	
(Date)			(Signature of Provider)		

Notary Instruction Provider Registration (additional information)

If more than 2 locations	s. list additional	laddresses	below:

Instruction Site Physical Address	City	State	Zip
Instruction Site Physical Address	City	State	Zip
Instruction Site Physical Address	City	State	Zip
If more than 3 instructors list addition	nal instructors below:		
4.	5.	6.	